

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Rely on Your Beliefs Fund

ADDRESS (number and street)

209 Pennsylvania Avenue, SE

☐ Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344648

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer

Paul Kilgore

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Rely on Your Beliefs Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 09 / 01 / 2014

To:

 M M / D D / Y Y Y Y  
 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		297097.82
(b) Cash on Hand at Beginning of Reporting Period.....	204278.88	
(c) Total Receipts (from Line 19) .....	54500.00	453838.27
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	258778.88	750936.09
7. Total Disbursements (from Line 31) .....	31740.97	523898.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	227037.91	227037.91
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Rely on Your Beliefs Fund

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
09 01 2014

To:

M M / D D / Y Y Y Y Y  
09 30 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

5000.00

49500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5000.00

49500.00

(b) Political Party Committees .....

0.00

338.27

(c) Other Political Committees

(such as PACs).....

49500.00

404000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

54500.00

453838.27

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

54500.00

453838.27

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

54500.00

453838.27

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	21740.97	245898.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	21740.97	245898.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	278000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	31740.97	523898.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31740.97	523898.18

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	54500.00	453838.27
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	54500.00	453838.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	21740.97	245898.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	21740.97	245898.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. William Danforth**

Mailing Address 10 Glenview Rd

City

Saint Louis

State

MO

Zip Code

63124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : 41016.C1855**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. Abbvie PAC**

Mailing Address 1 N Waukegan Rd

City

North Chicago

State

IL

Zip Code

60064-1802

FEC ID number of contributing  
federal political committee.

C

C00536573

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 04 / 2014

**Transaction ID : 40912.C1846**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. AICPA PAC**

Mailing Address 1455 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-1008

FEC ID number of contributing  
federal political committee.

C

C00077321

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

09 / 04 / 2014

**Transaction ID : 40912.C1844**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. American Society of Plastic Surgeons PAC**

Mailing Address 20 F St NW # 310A

City

Washington

State

DC

Zip Code

20001-6700

FEC ID number of contributing  
federal political committee.

C

C00249342

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 23 / 2014

**Transaction ID : 41016.C1850**

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. BASF Corporation Employees PAC**

Mailing Address 601 13th St NW Ste 200

City  
Washington

State Zip Code  
DC 20005-3807

FEC ID number of contributing  
federal political committee.

**C** C00340075

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09 / 04 / 2014**

**Transaction ID : 40912.C1847**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Davita Inc. PAC**

Mailing Address 601 Hawaii St

City  
El Segundo

State Zip Code  
CA 90245-4814

FEC ID number of contributing  
federal political committee.

**C** C00340943

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

**09 / 30 / 2014**

**Transaction ID : 41016.C1851**

Amount of Each Receipt this Period

3000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. Eli Lilly and Co. PAC**

Mailing Address 555 12th St NW Ste 650

City  
Washington

State Zip Code  
DC 20004-1209

FEC ID number of contributing  
federal political committee.

**C** C00082792

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09 / 23 / 2014**

**Transaction ID : 41016.C1848**

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

13000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. Farm Credit Council PAC**

Mailing Address 50 F St NW Ste 900

City  
Washington

State Zip Code  
DC 20001-1530

FEC ID number of contributing  
federal political committee.

**C** C00193631

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09 / 04 / 2014**

**Transaction ID : 40912.C1845**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Fox PAC**

Mailing Address 444 N Capitol St NW Ste 890

City  
Washington

State Zip Code  
DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00171421

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09 / 30 / 2014**

**Transaction ID : 41016.C1853**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C. General Electric PAC**

Mailing Address 1299 Pennsylvania Ave NW

City  
Washington

State Zip Code  
DC 20004-2400

FEC ID number of contributing  
federal political committee.

**C** C00024869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09 / 23 / 2014**

**Transaction ID : 41016.C1849**

Amount of Each Receipt this Period

4000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

14000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. Mortgage Bankers Association PAC**

Mailing Address 1919 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20006-3400

FEC ID number of contributing  
federal political committee.

C

C00004812

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : 41016.C1854**

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. Pricewaterhouse Coopers PAC**

Mailing Address 1301 K St NW Ste 800

City

Washington

State

DC

Zip Code

20005-3317

FEC ID number of contributing  
federal political committee.

C

C00107235

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : 41016.C1852**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **c. United States Cellular Corp. PAC**

Mailing Address 8410 W Bryn Mawr Ave

City

Chicago

State

IL

Zip Code

60631-3408

FEC ID number of contributing  
federal political committee.

C

C00336057

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2014

**Transaction ID : 40912.C1843**

Amount of Each Receipt this Period

5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. Windstream PAC**

Mailing Address 4001 N Rodney Parham Rd

City

Little Rock

State

AR

Zip Code

72212-2459

FEC ID number of contributing  
federal political committee.

C

C00425975

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 04 / 2014

**Transaction ID : 40912.C1842**

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

49500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

### A. Roy Blunt

City	State	Zip Code
Springfield	MO	65805-0100

Candidate Name

707.90

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

SEE BELOW

### B. Colony Hotel

09 / 10 / 2014

City	State	Zip Code
Kennebunkport	ME	04046-6303

Purpose of Disbursement
PAC Lodging

Candidate Name

707.90

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

**[MEMO ITEM]**  
MEMO: PAC LODGING

### C. Roy Blunt

City	State	Zip Code
Springfield	MO	65805-0100

Transaction ID : 40912.E2980

Purpose of Disbursement
PAC Travel Expense (No Itemization)

Candidate Name

Age Group	Percentage
18-24	109.01
25-34	~100
35-44	~100
45-54	~100
55-64	~100
65-74	~100
75-84	~100
85+	~100

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

PAC TRAVEL EXPENSE (NO ITEMIZATION)

**SUBTOTAL** of Disbursements This Page (optional).....

816.91

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. GMD Technologies**

Mailing Address PO Box 3663

City	State	Zip Code
Jackson Hole	WY	83001-3663

Purpose of Disbursement  
PAC IT Services

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

**Transaction ID : 40912.E2981**

Amount of Each Disbursement this Period

100.00
--------

PAC IT SERVICES

Full Name (Last, First, Middle Initial)

**B. McKenna Long & Aldridge**

Mailing Address 303 Peachtree St NE Ste 5300

City	State	Zip Code
Atlanta	GA	30308-3265

Purpose of Disbursement  
PAC Legal Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : 40912.E2969**

Amount of Each Disbursement this Period

230.00
--------

PAC LEGAL FEES

Full Name (Last, First, Middle Initial)

**C. Professional Data Services, Inc.**

Mailing Address 2470 Daniels Bridge Rd Ste 121

City	State	Zip Code
Athens	GA	30606-6188

Purpose of Disbursement  
PAC Compliance Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : 40912.E2968**

Amount of Each Disbursement this Period

1525.71
---------

PAC COMPLIANCE CONSULTING

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1855.71
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 18

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Thompson Communications**

Mailing Address PO Box 5

City  
MarshfieldState  
MOZip Code  
65706-0005Purpose of Disbursement  
See Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2014
**Transaction ID : 40918.E2983**

Amount of Each Disbursement this Period

12897.89

SEE BELOW

Full Name (Last, First, Middle Initial)

**B. Thompson Communications**

Mailing Address PO Box 5

City  
MarshfieldState  
MOZip Code  
65706-0005Purpose of Disbursement  
PAC Payroll Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2014
**Transaction ID : 40918.E2984**

Amount of Each Disbursement this Period

730.07

**[MEMO ITEM]**

MEMO: PAC PAYROLL EXPENSE

Full Name (Last, First, Middle Initial)

**C. Keri Ann Hayes**

Mailing Address 209 Pennsylvania Ave SE

City  
WashingtonState  
DCZip Code  
20003-1107Purpose of Disbursement  
PAC Salary & Benefits

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2014
**Transaction ID : 40918.E2985**

Amount of Each Disbursement this Period

12167.82

**[MEMO ITEM]**

MEMO: PAC SALARY &amp; BENEFITS

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12897.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 18

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 19769

City Irvine    State CA    Zip Code 92623-9769

Purpose of Disbursement  
PAC Telephone

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 26 / 2014
**Transaction ID : 41016.E3000**

Amount of Each Disbursement this Period

163.29

PAC TELEPHONE

Full Name (Last, First, Middle Initial)

**B. Visa**

Mailing Address PO Box 4512

City Carol Stream    State IL    Zip Code 60197-4512

Purpose of Disbursement  
See Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2014
**Transaction ID : 40912.E2970**

Amount of Each Disbursement this Period

5530.18

SEE BELOW

Full Name (Last, First, Middle Initial)

**C. Bistro Bis**

Mailing Address 15 E St NW

City Washington    State DC    Zip Code 20001-1501

Purpose of Disbursement  
PAC Event Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2014
**Transaction ID : 40912.E2972**

Amount of Each Disbursement this Period

2657.90

**[MEMO ITEM]**

MEMO: PAC EVENT CATERING

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5693.47

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

### A. UPS

The image shows the top portion of three credit cards, illustrating the first three groups of the card number. The first card shows the first two groups (09), the second card shows the third group (04), and the third card shows the fourth group (2014). Each group is enclosed in a box with a label above it: 'M M' for the first group, 'D D' for the second group, and 'Y Y Y Y' for the fourth group.

Category/  
Type

21.38

MEMO: PAC SHIPPING

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

### B. AT&T

09 / 04 / 2014

Category/  
Type

154.17

MEMO: PAC TELEPHONE

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

### C. Adelman Travel Group

Category/  
Type

50.00

MEMO: PAC TRAVEL EXPENSE

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Rely on Your Beliefs Fund

Full Name (Last, First, Middle Initial)

**A. Perdue for Senate**

Mailing Address 3110 Maple Dr NE Ste 400

City Atlanta	State GA	Zip Code 30305-2650
-----------------	-------------	------------------------

Purpose of Disbursement  
CONTRIBUTION - DEBT RETIREMENT

Candidate Name

DAVID PERDUE

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: GA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2014

Transaction ID : 40918.E2987

Amount of Each Disbursement this Period

5000.00
---------

CONTRIBUTION - DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

**B. Perdue for Senate**

Mailing Address 3110 Maple Dr NE Ste 400

City Atlanta	State GA	Zip Code 30305-2650
-----------------	-------------	------------------------

Purpose of Disbursement  
CONTRIBUTION - PRIMARY RUNOFF DEBT

Candidate Name

DAVID PERDUE

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Runoff

State: GA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2014

Transaction ID : 40918.E2988

Amount of Each Disbursement this Period

5000.00
---------

CONTRIBUTION - PRIMARY RUNOFF DEBT

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10000.00
----------

10000.00
----------